Revision: HCFA-PM-91-4 (BF AUGUST 1991	OMB No.: 0938-							
State/Territory: WISCONSIN								
42 CFR 447.51 through 447.58 (a) Unles deduc excee	et Cost Sharing and Similar Charges es a waiver under 42 CFR 431.55(g) applies, etibles, coinsurance rates, and copayments do not ed the maximum allowable charges under 42 CFR							
of the Act and (categorial benefits)	ot as specified in items 4.18(b)(4), (5), 6) below, with respect to individuals covered as corically needy or as qualified Medicare iciaries (as defined in section 1905(p)(1) of act) under the plan:							
	enrollment fee, premium, or similar charge is sposed under the plan.							
ch	deductible, coinsurance, copayment, or similar arge is imposed under the plan for the llowing:							
(i)	Services to individuals under age 18, or under							
	// Age 20							
	<u>/</u> Age 21							
	Reasonable categories of individuals who are age 18 or older, but under age 21, to whom charges apply are listed below, if applicable.							
(ii)	Services to pregnant women related to the pregnancy or any other medical condition that may complicate the pregnancy.							
TN No. 91-0026 Supersedes Approval Date 12-9-91 Effective Date 10/1/91 TN No. 86-0033								
TN No. 86-0033	HCFA ID: 7982E							

Revision: HCFA-PM-91-4

(BPD)

OMB No.: 0938-

AUGUST 1991

State/Territory:

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Citation

4.18(b)(2) (Continued)

42 CFR 447.51 through 447.58

(iii) All services furnished to pregnant women.

> /X7 Not applicable. Charges apply for services to pregnant women unrelated to the pregnancy.

- (iv) Services furnished to any individual who is an inpatient in a hospital, long-term care facility, or other medical institution, if the individual is required, as a condition of receiving services in the institution, to spend for medical care costs all but a minimal amount of his or her income required for personal needs.
- (V) Emergency services if the services meet the requirements in 42 CFR 447.53(b)(4).
- Family planning services and supplies furnished (vi) to individuals of childbearing age.
- (vii) Services furnished by a health maintenance organization in which the individual is enrolled.

1916 of the Act, P.L. 99-272, (Section 9505)

Services furnished to an individual (viii) receiving hospice care, as defined in section 1905(o) of the Act.

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Revision:	HCFA-PM-91- 4 AUGUST 1991	(BPD)	OMB No.: 0938-				
	State/Territory:		VISCONSIN				
<u>Citation</u>	4.18(b) (Co	ontinued)					
42 CFR 447 through 447.48	.51 (3)	applies, copayment services	waiver under 42 CFR 431.55(g) nominal deductible, coinsurance, t, or similar charges are imposed for that are not excluded from such charges em (b)(2) above.				
// Not applicable. No such charges are imposed.							
<ul><li>(i) For any service, no more than one type of charge is imposed.</li></ul>							
(ii) Charges apply to services furnished to the following age groups:							
		<u>/</u> Ž	7 18 or older				
			7 19 or older				
			7 20 or older				
			7 21 or older				
		fo in	arges apply to services furnished to the llowing reasonable categories of dividuals listed below who are 18 years of e or older but under age 21.				

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State/Territory:

VISCONSIN

Citation
42 CFR 447.51

· 1000

4.18(b)(3) (Continued)

42 CFR 447.51 through 447.58

- (iii) For the categorically needy and qualified Medicare beneficiaries, <u>ATTACHMENT 4.18-A</u> specifies the:
  - (A) Service(s) for which a charge(s) is applied;
  - (B) Nature of the charge imposed on each service;
  - (C) Amount(s) of and basis for determining
    the charge(s);
  - (D) Method used to collect the charge(s);
  - (E) Basis for determining whether an individual is unable to pay the charge and the means by which such an individual is identified to providers;
  - (F) Procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b); and
  - (G) Cumulative maximum that applies to all deductible, coinsurance or copayment charges imposed on a specified time period.
    - Not applicable. There is no maximum.

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OMB No.: 0938-Revision: HCFA-PM-91-4 (BPD) AUGUST 1991 WISCONSIN State/Territory: Citation 4.18(b)(4) // A monthly premium is imposed on pregnant women and infants who are covered under 1916(c) of the Act section 1902(a)(10)(A)(ii)(IX) of the Act and whose income equals or exceeds 150 percent of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(c) of the Act are met. ATTACHMENT 4.18-D specifies the method the State uses for determining the premium and the criteria for determining what constitutes undue hardship for waiving payment of premiums by recipients. 4.18(b)(5)  $\sqrt{\phantom{a}}$  For families receiving extended benefits 1902(a)(52) during a second 6-month period under and 1925(b) section 1925 of the Act, a monthly premium of the Act is imposed in accordance with sections 1925(b)(4) and (5) of the Act. 4.18(b)(6) // A monthly premium, set on a sliding scale, 1916(d) of imposed on qualified disabled and working the Act individuals who are covered under section 1902(a)(10)(E)(ii) of the Act and whose income exceeds 150 percent (but does not exceed 200 percent) of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(d)

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of the Act are met. ATTACHMENT 4.18-E

uses for determining the premium.

specifies the method and standards the State



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	State	ce/Territory: _		WISCONSIN	. <del>-</del>			
Citation 42 CFR 447 through 44		4.18(c) <u>/</u> /		dividuals are cov e plan.	vered as m	edical	lly needy	under
		(1) Z	7	An enrollment feimposed. ATTACH amount of and lisubject to the CFR 447.52(b) arregarding the efinon-payment of tsimilar charge.	MENT 4.18 Lability p maximum al nd defines ffect on r	-B specified lowable the Seciple	ecifies the for such le charges state's posterior of	ne charges s in 42 olicy
447.51 thr 447.58	ough	(2)		No deductible, or similar chargethe following:				olan for
			(i)	Services to i under  /_/ Age /_/ Age /_/ Age	19 20	s unde	er age 18,	, or
				Reasonable are age 18 charges ag applicable	e categori 3, but und oply are l	er age	21, to v	whom

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Revision: HCFA-PM-91-4 (BPD) OMB No.: 0938-AUGUST 1991 WISCONSIN State/Territory: 4.18 (c)(2) (Continued) Citation 42 CFR 447.51 (ii) Services to pregnant women related to the pregnancy or any other medical condition through 447.58 that may complicate the pregnancy. (iii) All services furnished to pregnant women. X Not applicable. Charges apply for services to pregnant women unrelated to the pregnancy. (iv) Services furnished to any individual who is an inpatient in a hospital, long-term care facility, or other medical institution, if the individual is required, as a condition of receiving services in the institution, to spend for medical care costs all but a minimal amount of his income required for personal needs. (v) Emergency services if the services meet the requirements in 42 CFR 447.53(b)(4). (vi) Family planning services and supplies furnished to individuals of childbearing age. 1916 of the Act, (vii) Services furnished to an individual P.L. 99-272 receiving hospice care, as defined in (Section 9505) section 1905(o) of the Act. 447.51 through (viii) Services provided by a health maintenance

/\_/ Not applicable. No such charges are imposed.

organization (HMO) to enrolled individuals.

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447.58

HCFA ID: 7982E

Revision: HCFA-PM-91-4 (BPD) OMB No.: 0938-AUGUST 1991 WISCONSIN State/Territory: 4.18(c)(3) Unless a waiver under 42 CFR 431.55(g) applies, Citation nominal deductible, coinsurance, copayment, or similar charges are imposed on services that are not excluded from such charges under item (b)(2) above. \_\_/ Not applicable. No such charges are imposed. For any service, no more than one type of (i) charge is imposed. (ii) Charges apply to services furnished to the following age group: 18 or older 19 or older 20 or older 21 or older Reasonable categories of individuals who are 18 years of age, but under 21, to whom charges apply are listed below, if applicable.

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AUGUST 1991

OMB No.: 0938-

State/Territory:

WISCONSIN

<u>Citation</u>

4.18(c)(3) (Continued)

447.51 through

(iii) For the medically needy, and other optional groups, <u>ATTACHMENT 4.18-C</u> specifies the:

447.58

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- (A) Service(s) for which charge(s) is applied;
- (B) Nature of the charge imposed on each service;
- (C) Amount(s) of and basis for determining the charge(s);
- (D) Method used to collect the charge(s);
- (E) Basis for determining whether an individual is unable to pay the charge(s) and the means by which such an individual is identified to providers;
- (F) Procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b); and
- (G) Cumulative maximum that applies to all deductible, coinsurance, or copayment charges imposed on a family during a specified time period.
  - // Not applicable. There is no maximum.

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